DECLARATION AND POWER OF ATTORNEY Original Application

ATTORNEY'S DOCKET	NO	
21105		

As a below named inventor, I declare that I have reviewed and understand the contents of the specification, including the claims, as amended by any amendment specifically referred to in this Declaration, that the information given herein is true, that I believe that I am the original, first and sole inventor if only one name is listed at 201 below, or a joint inventor if plural inventors are named below at 201 et seq., of the invention entitled:

	HOLLO	OW FIBER MEMBRANE GAS :	SEPARATION C	ARTRIDGE AN	ID GAS PUR	IFICATION A	ASSEMBLY
⊠ t	he attache	ed specification or					
		cation in application Serial No.		filed		amended	
		tion not accompanying application)			Month, Year)		(Day, Month, Year)
with before or m this a appli more repre- twelv	are my or our or our or than or application, ication in an extended that the than twelves we months proceed that the control of the control o	dge a duty to disclose information 56(a), that I do not know and do or invention thereof or patented or ne year prior to this application, o that the invention has not been pay country foreign to the United Size months prior to this application or assigns in any country foreign or or to the filing date of this application are identified at 600, and, as reproperly a property of the property of the filing date of the application are identified at 600, and, as reproperly a property of the property of the applications	not believe that the described in any part in public use or extented or made tates of America and that as to approximate to the United Station and all foreign.	he same was everinted publication on sale in the Unthe subject of an an application oplications for parates of America, on applications for parates of America,	rer known or under the states of a states of a inventor's cefiled by me of tent or inventor the earliest f	used in the Ur ry before my of America more rtificate issued r my legal rep or's certificate illed foreign ar	nited States of America or our invention thereof, e than one year prior to I before the date of this resentatives or assigns filed by me or my legal
POW and the Bla	attact VER OF AT transact all ake T. Bied onald T. Bla	ck Reg. No. 279	I hereby appoint the mark Office connected Stanley 99 Robert	ne following attor ected therewith. (Ktorides J. Follett	ney(s) and/or List name and Reg. No Reg. No	agent(s) to produce of registration in produce of the contract	osecute this application umber)
SEI PR/ Law 39 (AXAIR TECH	SPONDENCE TO: INOLOGY, INC. M1-557 y Road 810-5113	74	J. Rosenblum DIRECT TELEI Robert J. Foli (203) 837-236	ett 33	S TO:	
201	FULL NAME OF INVENTOR RESIDENCE & CITIZENSHIP	BIKSON CITY Brookline	BENJAMIN STATE OR FOREIGN COUNTRY Massachusetts CITY		BENJAMIN STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP		
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 18 Gibbs Street, #3			STATE OR COUNTRY		ziP CODE
202	FULL NAME OF INVENTOR	LAST NAME BARTHOLOMEW	Brookline FIRST NAME SCOTT		1	DREW	02446
	RESIDENCE & CITIZENSHIP	Worcester	STATE OR FOREIGN COUNTRY Massachusetts		U.S	COUNTRY OF CITIZENSHIP U.S.A.	
	POST	POST OFFICE ADDRESS	CITY		STATE OR COUN	TRY	ziP CODE
					1		02446

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DECLARATION AND POWER OF ATTORNEY Original Application Page 2 (If Required)

ATTORNEY'S DOCKET NO. 21105

	FILINO	IG OF EARLIEST FO B DATE OF THIS API	REIGN APPLICATION PLICATION. LIST A	ON(S), IF LL APPLI	ANY, FILEI CATIONS F	O WITHIN	N 12 MO I DATE (NTHS PRI OF FIRST F	OR TO THE U.S. ILING, IF MORE
	THAN ONE (1). COUNTRY AF		APPLICATION NUM			E OF FILING MONTH, YEAR)		PRIORITY OF WHICH IS CLAIMED UNDER 35 USC 119	
	170-07-14-							☐ YES	□ NO
								☐ YES	□ NO
								☐ YES	□ NO
								☐ YES	□ NO
601	Listing of All Foreign Applications Filed, if any, MORE THAN TWELVE MONTHS PRIOR, to U.S. Filing Date of this Application.								
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	FULL NAME OF	LAST NAME	FIRST NAME	BRADLEY		MIDDLE NAM	E NAME		
7 2 0 0	INVENTOR	JOHNSON	BRADLE			QUINN			
204	RESIDENCE &	CITY					RY OF CITIZENSHIP		
	CITIZENSHIP	Lakeville POST OFFICE ADDRESS		Massachusetts CITY ISTATE OR		STATE OR C	U.S.A.		
2200	OFFICE ADDRESS						.0011111		
	FULL	175 Coountry Stree	FIRST NAME			<u> MA</u>	MIDDLE NAME		2347
	NAME OF INVENTOR								
05	RESIDENCE &	CITY	STATE OR FO	STATE OR FOREIGN COUNTRY COUNTRY			COUNTRY O	RY OF CITIZENSHIP	
20	CITIZENSHIP	DOST OFFICE ADDRESS	CITY	DIR					WAY-1-1-
	OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	CITY		STATE OR C	R COUNTRY ZIP CODE		CODE
	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	FIRST NAME MI		MIDDLE NAM	DLE NAME		
206	RESIDENCE &	CITY	STATE OR FO	STATE OR FOREIGN COUNTRY COUN		COUNTRY O	NTRY OF CITIZENSHIP		
7(CITIZENSHIP								
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY			STATE OR C	OUNTRY	ZII	CODE

herein of mv own knowledge are true and that all statements made on information and belief